## **APPLICATION DATA SHEET**

**Application Information** 

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification:: None

Suggested Group Art Unit:: None

CD-ROM or CD-R?:: None

Title:: PHARMACEUTICAL DOSAGE FORM BEARING

PREGNANCY-FRIENDLY INDICIA

Attorney Docket Number:: GOUD:031US

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure:: 1

Total Drawing Sheets:: 1

Small Entity:: Yes

Petition Included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Number::

Secrecy Order in Parent Appl?:: No

**Inventor Information** 

Inventor Authority Type:: Inventor

Primary Citizenship Country:: Canada

Status: Full Capacity

Given Name:: ÉRIC

Middle Name::

Family Name:: GERVAIS

Name Suffix::

City of Residence:: Laval

25310677.1

Country of Residence:: Canada

Street:: 2526, des Oiseaux

City:: Laval

State or Province:: Québec

Country:: Canada

Postal or Zip Code:: H7L 4W9

Inventor Authority Type:: Inventor

Primary Citizenship Country:: Canada

Status: Full Capacity

Given Name:: GORDANA

Middle Name::

Family Name:: ATANACKOVIC

Name Suffix::

City of Residence:: Dollard-des-Ormeaux

Country of Residence:: Canada

Street:: 39, Place Dubois

State or Province:: Québec

Country:: Canada

Postal or Zip Code:: H9B 1L2

Inventor Authority Type:: Inventor

Primary Citizenship Country:: Canada

Status: Full Capacity

Given Name:: RAYMOND

Middle Name::

Family Name:: HÉBERT

Name Suffix::

City of Residence:: lle Bizard

Country of Residence:: Canada

25310677.1

Street::

111, rue Doral

City::

lle Bizard

State or Province::

Québec

Country::

Canada

Postal or Zip Code::

H9E 1R9

## **Correspondence Information**

Name::

Michael R. Krawzsenek

Street::

Fulbright & Jaworski L.L.P.

600 Congress Avenue, Suite 2400

City::

Austin

State or Province::

TX

Postal or Zip Code::

78701

Telephone::

(512) 536-3020

Fax::

(512) 536-4598

Email address::

mkrawzsenek@fulbright.com

## Representative Information

Representative Designation:: Registration Number::

Representative Name::

Primary

51,898

Michael R. Krawzsenek

Associate

**Associate** 

## **Domestic Priority Information**

Application::

Continuity Type::

Parent Application::

Parent Filing Date::

This Application

Continuation of

Appl. No.

MM/DD/YY

Appl. No.

Continuation of

Appl. No.

MM/DD/YY

**Foreign Priority Information** 

Country:: Application Number:: Filing Date::

Canada 2,392,486 July 5, 2002

**Assignee Information** 

Assignee Name:: Duchesnay Inc.

Street:: 2925, boulevard Industriel

City:: Laval

State or Province:: Québec

Country:: Canada

Postal or Zip Code:: H9E 1R9